	U.S. Patent and Trademark Office 11 5 2006 OKB 065
11-1-11-0	U.S. Patent and Trademark Office: U.S. Patent and Trademark Office: U.S. Patent and Trademark Office: U.S. OSS 175 UZ006. OMB 065
Under the Panerwork Reduction Act of 1995, no persons are required to res.	U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMM- pond to a collection of information unless it of the DEPARTMENT OF COMM-
Under the Panerwork Reduction Act of 1995, no persons are required to res	
TATERT APPLICATION FEE DETERMINA	HON RECORD

	٠
2)
Ĉ	5
~	1
)
_	
0	•
	_
)
7	₹
	,
-	Ξ
	5
\geq	•
	2
ব	
	•
*	•
Sign	•
Œ)
_=	

		PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Dockot Humber		
		CLAIMS AS FILED - PART I							OTH	ER THAN	
			(Colum	<u>^ 1) </u>	(Column 2)		SMAL	L ENTITY	– Or	SMAI	L ENTIT
	ro	R	MUMBER	FILEO .	NUMBER EXTRA	- 1	RATE	FEE	'	0	
	GASIC FEE (37 CFR 1.16)	ali				\exists			1 .	RATE	FE
	TOTAL CLAIL	s				\dashv		- 5	, or		1
	(37 CFR 1.16(m	Inus 20 =	-	╝	_x s =		OR	X 5 =	
	114DEPE14DE14 (37 CFR 1.16(t	ol)	m	lnus 3 = .			x s =		1		 .
	AUU TIDI C DCI	25110511				\dashv			OR	X 5 ===	
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+ 5=		OR	+ 5=	
-	" If the differen	ce in column 1 is	loss than zo	ıro, enlər "O" in col	lumn 2.		JATOI		OR	JATOI	
	ari	CLAIMS AS	S AMEN(DED – PART I	1 ·						
F	8-25-0	S (Column		(Column		_,	SMALL	ENTITY	OR		R THAN L ENTITY
	Total Total Total (If CER 1.16) Independent (If CER 1.16)	CLAIM REMAINI AFTEF AMENDMI	NG .	HIGHES' NUMBER PREVIOUS	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADD VIONT
	Total (37 CFR 1.16)	1	Min	PAID FOR	<u>`</u>	1	 	FEE		 	FEE
	Z Independent		 -	120		-	x s=		OR	X \$=	
	(27 CFR 1.160	* 3	Min	" 3	1.	1	× \$=		OR	X 5 =	!
:	FIRST PRES	ENTATION OF MUL	TIPLE DEPE	NDENT CLAIM (3:	7 CER 1 16(4))	1 1					
┢				STOCKT COM (3)	7 CFR 1.10(a))	ا ٠ ا	+5=		OR	+ 5=	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
	т	(Column 1)		(Column 2	2) (Column 3)						_
α		CLAIMS REMAINING		HIGHEST	possesia.		:				
5	:	AFTER	'	PREVIOUSL	PRESENT Y EXTRA		RATE	ADDI- TIONAL	,	RATE	ADDI- ANOIT
Į.	Total	AMENDMEN		PAID FOR				FEE			FEE
Q	(37 CFR 1.16(c)) Independent	 	Minus		=		x s=		OR	x s=	
AMENDMENT	(37 CFR 1.16(b))	L	Minus		±		x \$=		OR	=	
< _	FIRST PRESE	TATION OF MULTI	PLE DEPEN	DENT CLAIM (37 (CFR 1.16(d)		+\$=		OR	+5=	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(0-1)				,	worther f		OR		
		(Column 1)		(Column 2)	(Column 3)	<u>_</u>					
		REMAINING AFTER AMENOMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
JAN L	Total (IV CFR 1.16(c))	•	Minus	44	E	Ι,	(\$ =		OR	x \$=	
	Independent (37 CFR 1.16(b))		Minus	•••	±		s=		.OR	x \$=	
<u>[</u>	RST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						\$=		OR	+ \$=	
• •	I the entor in a	umo 1 is less tha	- 44		o *0° in column 3	T	OTAL DO'L FEE		OR	TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

* If the "Highest Number Previously Pald For" IN THIS SPACE is less than 20, enter "20".

* If the "Highest Number Previously Pald For" (IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Pald For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by 1 USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any commer on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Pate and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO TH ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.